

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Helmut L. Kayan EXAMINER: Michelle Lopez
 SERIAL No.: 10/697,523 GROUP: Art Unit 3721
 FILING OR 371(C) DATE: October 30, 2003 DATED: December 2, 2008
 TITLE: APPARATUS AND METHOD FOR SURGICAL FASTENING

Mail Stop AMENDMENT
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Filed Via EFS-Web

AMENDMENT TRANSMITTAL FORM

Sir:

Transmitted herewith is an Amendment in the above-identified application.

Applicant claims small entity status of this application under 37 C.F.R. 1.27
 No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT	(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	SMALL ENTITY		OR	OTHER THAN A SMALL ENTITY	
				RATE	ADDL. FEE		RATE	ADDL. FEE
TOTAL	* 20	MINUS	** 20	= 0		x 26=	\$	
INDEP.	* 3	MINUS	*** 3	= 0		x 110=	\$	
						x 195=	\$	x 390=
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS				TOTAL	\$ 0.00		TOTAL	\$ 0.00

* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.

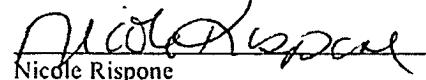
** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" in this space is less than 20, write "20" in this space.

*** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" in this space is less than 3, write "3" in this space. The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior amendment or the number of claims originally filed.

CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being transmitted on the date below with the United States Patent and Trademark Office, PO Box 1450, Alexandria, VA 22313-1450, via electronic submission.

Dated: December 2, 2008


 Nicole Risponde

Please charge Deposit Account No. 21-0550 in the amount of \$_____.

A check in the amount of \$ _____ is enclosed.

Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 21-0550. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 21-0550 therefor.

Respectfully submitted,



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